

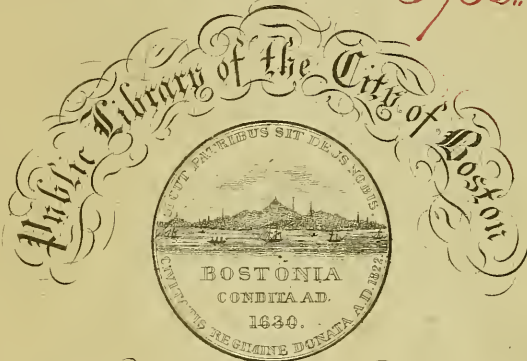


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OUTLINES OF INQUIRY

RELATING TO

Hygienic, Medical, and Surgical

EXPERIENCE IN THE WAR.

(PRIVATE EDITION.)

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OUTLINES OF INQUIRY

RELATING TO

HYGIENIC, MEDICAL, AND SURGICAL EXPERIENCE IN THE WAR.

*Departments of Inquiry,** $\left\{ \begin{array}{l} 1. \text{ HYGIENIC AND MEDICAL.} \\ 2. \text{ SURGICAL.} \end{array} \right.$

Subjects.

- (u) 1. The Preventable Causes of Sickness and Mortality from *disease.*
- (us) 2. The Sanitary Condition and wants of the Hospitals; also, of the Hospital Transportation, and all temporary dépôts of sick and wounded. [Information under this head relates mainly to facts observed, and to testimony obtained from persons who are or have been connected with the medical or administrative duties of the Hospitals or the Hospital Transportation.]
- (u) 3. The Location, Construction, and Hygiene of Hospitals—including Hospital Administration.
- (u) 4. Malarial Diseases, and Prophylactic protection against them.
- (u) 5. Scurvy, and the Sanitary Measures for its Prevention.
- (u) 6. The Special Pathology of Fatal Diseases, in which important hygienic principles are taught or confirmed.

* In the enumeration of the Topics of Inquiry, the letter H will denote those pertaining to Hygiene and Medicine exclusively; and the letter S will denote those pertaining to Surgery; while HS denotes the topics which pertain jointly to Hygiene and Surgery. It is the chief object of all the inquiries, Surgical as well as Medical, to obtain and report evidence which shall illustrate the *hygienic* relations of the subjects investigated.

- (H) 7. Sickness-Rates, and the Preventable Causes of invaliding and broken health.
- (HS) 8. Resistance to Disease, illustrated by records of experience, proving the utility of sanitary works and sanitary supplies, prophylactic care, abstinence from intoxicating drinks, etc.; also, as regards ages and periods of service; garrison and field service; sudden and extreme transitions from one latitude to another; and the results of experience from different kinds of subsistence. Endurance of Wounds and Surgical Operations, to be illustrated and studied in like manner.
- (HS) 9. Sanitary History of Hospital Transportation, and of the Transportation of Troops by Water. The services of the Sanitary Commission in connection therewith.
- (S) 10. Surgical and Pathological Records of Wounds and Surgery.
- (S) 11. Preventable Causes of ill-success and failures in Surgical Operations, and of delayed or imperfect recovery from Wounds.
- (S) 12. Researches into the hygienic and conservative relations of particular methods of practice or of sanitary regulations, as illustrated by trustworthy experience and statistics.
- (HS) 13. Special Study of Certain Accidents of Surgery and Wounds in Hospitals, considered as results of neglect or insufficiency of hygienic care and prevision, hospital gangrene, pyæmia, secondary hæmorrhage, excessive sloughing, tetanus, and erysipelas, being leading subjects for such study.
- (S) 14. Surgical improvements, improved and useful appliances and apparatus, hospital fixtures and furniture, and practical reports upon all the more important improvements in the care of wounds.

- (us) 15. Sanitary and Surgical Experience in the Insurgent Armies and Hospitals, considered with reference to improvements in military hygiene.
- (ii) 16. The Hygienic Condition of Garrisons and the various arms of military and naval service, with regard to past experience, present circumstances, and needed improvements of their hygienic state.

Analysis and Arrangement of the Topics

I. PREVENTABLE CAUSES OF DISEASES.

Record, observations and testimony relating to endemic and epidemic diseases so far as relates to preventable causes; particularly giving the hygienic conditions observed in connection with the prevalence of Diarrhœal diseases, Fevers, Infectious and Contagious maladies, Scurvy, Pulmonary diseases, and impairment of Assimilation and vigor; also, record such statistical and practical observations as can be obtained regarding results and defects of Vaccination, the value or the want of improved diet in Hospitals, the importance of the full recovery of convalescents before returning to duty, and other illustrations of the practical importance of hygienic knowledge and sanitary care.

These observations and records to be included under the following heads:

- (a) Records of Epidemics and Endemics of Diarrhœal Maladies; Typhus, Typhoid or Enteric Fever; Typho-Malarial Fever; first, as regards *localizing causes*; and second, as regards other and more *specific causes*.
- (b) Small-pox and all exanthematous diseases, including the facts relating to *cleanliness, preventive care, camp habits*, etc.
- (c) *Vaccination*.—Testimony and statistics showing good results of its faithful application, and the evil results of imperfect or neglected Vaccination.
- (d.) The Scorbutic Diathesis, considered as a general or complicating cause of other maladies and as a cause of military inefficiency, broken health, etc.

- (e.) *Army Alimentation and Hospital Dietaries.*
- (f.) *Periods and Ratios of Convalescence and Recoveries.*
- (g.) Results of *Hygienic Knowledge and Sanitary Care*, illustrated by examples and statistics.

II. SANITARY CONDITION AND WANTS OF THE HOSPITALS, THE HOSPITAL TRANSPORTATION, AND TEMPORARY HOSPITAL DEPOTS.

- (a.) Report the Sanitary conditions and wants as observed by you, and take minutes of trustworthy testimony, if important, relating to *inevitable* wants, and relating to *preventable* or unnecessary suffering and perils.
- (b.) Describe the condition and management of Hospital Transportation, and report the evidence and the suggestions obtained concerning it from trustworthy sources of information.
- (c.) Report upon the present state of the subsistence, special diet, nursing and medical care of the sick and wounded in all places visited.
- (d.) Report the evidence obtained regarding the amount and utility of the personal services of lady nurses and female attendants in the different classes of Hospitals.

III. HOSPITAL HYGIENE.

- (a.) Compare the more permanent Field Hospitals with the Hospitals in towns. [Glean essential facts regarding such experience as can now be reported, particularly as relates to Hospital Endemics, Fevers, and Death-rates.]

- (b.) Record the testimony and statistics concerning experience in Hospital Tents, as compared with other Hospitals, particularly in the treatment of fevers—not malarial, Dysentery, etc., and capital wounds; noting particularly the results of experience in the arrest and prevention of Hospital Gangrene, Pyæmia, Secondary Hæmorrhages, excessive Sloughing, Dysenteric and Typhoid conditions, and all Dyserasiac and Endemic evils that occur in crowded Hospitals.
- (c.) Describe the improved and most important devices for ventilating, cleansing, and warming Hospital wards. In regard to *ventilation*, report precisely by what means the ingress and egress are secured: In regard to *Cleansing*, as to comparative results of wet and of dry cleaning; also as to means of flushing the drains and privies.
- (d.) Record facts concerning the defects and the improvements in Military Hospitals; also to note all practically important suggestions by experienced Medical Officers.
- (e.) Take notes of statistical and other facts relating to overcrowding of Hospitals and of areas occupied by Hospitals; also of facts illustrating the influence of long continued occupation of the same site, or by the same classes of wounds or diseases.
- (f.) Take notes of every decided improvement in construction, arrangement, and administration of Hospitals.
- (g.) Give a concise description of the plan, capacity, and present population of each Hospital visited, and state the reasons why there have been or should be any essential modifications and improvements.
- (h.) Obtain testimony and statistics that will correctly illustrate the results of retaining in the temporary Hospitals, near the field, patients with fever, dysentery, and certain classes of wounds, as compared with results of long

transportation, and subsequent treatment in permanent Hospitals.

- (h.) Take notes of the most practical improvements in Field Hospitals and Hospital Tents, and obtain records of experience connected therewith.
- (i.) Take notes of particular improvements in Hospital dietaries and kitchens, and record evidence regarding the practical defects of Hospital funds and their management.
- (j.) Record evidence respecting the usefulness or the abuse of supplies furnished by the Sanitary Commission.
- (k.) Observe and obtain evidence regarding causes of slow convalescence and imperfect recoveries.

IV. MALARIAL DISEASES.—PROPHYLAXIS.

- (a.) Record results of observations and experience regarding the agency of Malarial poisoning upon the history of camp diseases and the surgery of the war. [Classify the records on this subject under the heads of Camp Fever, Diarrhœal Maladies, Scurvy, Pulmonary Diseases, Wounds, Surgery, Invaliding.]
- (b.) Record practical statements, showing the influence of Quinia and the best methods of its prophylactic employment, of flannel and extra clothing, and of care in camping and duty.
- (c.) Obtain and record accurate information respecting the malarious history of particular localities and conditions. [When desirable, refer to the experience of the war as compared with Drake's History of Diseases in the Mississippi Valley, and to the best experience of medical observers in the places described.]

V. SCURVY, AND THE SANITARY WORK OF ITS PREVENTION.

- (a.) Record observations and take testimony relating to the present existence of Scurvy wherever observed or suspected.
- (b.) Obtain statistical and other trustworthy evidence concerning the extent and results of the prevalence of Scurvy in particular commands and under particular circumstances, at any place or period during the war; and record official testimony regarding its prevalence in particular garrisons, hospitals and ships, during any period of the war.
- (c.) Obtain testimony and statistics from Military Authorities, showing the practical value of antiscorbutic *supplies and sanitary provision* in removing or guarding against Scurvy.
- (d.) Record evidence upon the question of the relative value of fresh vegetables and fruits, and those that have been preserved by desicating, canning and sealing, drying, etc.
- (e.) Obtain testimony from all sources of information, showing the necessities that have called for supply of antiscorbutics by the Sanitary Commission, and place the Medical Committee in correspondence with the most important sources of information relative to this subject.

VI. SPECIAL PATHOLOGICAL INQUIRIES.

- (a.) What Diseases have been most fatal?
- (b.) What Diseases are characterized by marked anatomical lesions?

- (c.) Give a general description of the lesions, so far as they illustrate the preventable nature or the hygienic history of the diseases mentioned.
- (d.) State what important pathological inquiries ought to be made by medical officers that have not been made: also state what investigation have been made by official authority.
- (e.) State what researches need to be made and can be made under the direction of the Sanitary Commission.
- (f.) Record the results of original pathological researches in reference to the anatomical [histological] changes in the tissues and organs that come under autopsic inspection.
- (g.) In the absence of autopsic inspections in cases of particular importance for pathological inquiry, report the rational evidences of the pathological lesions, and use proper means to induce medical officers to report subsequent and more exact results of their researches. Request their correspondence upon this subject.
- (h.) Report the Officers and Hospitals that provide for or pursue thorough pathological researches.

VI. SICKNESS-RATES, AND PREVENTABLE CAUSES OF INVALIDING AND BROKEN HEALTH.

- (a.) What is (or has recently been) the average (constant) sickness-rate in the command, or force, during a period not less than three months?
- (b.) What have been the ratios of malarial, diarrhoeal, pulmonary, and febrile maladies respectively?
- (c.) What disease is and has been a chief cause of invaliding and broken health?

- (d.) In what respect and to what extent have the sources of that disease [or those diseases] been preventable?
- (e.) Is the practical importance of definitely ascertaining and frequently reporting the preventable causes of a high sickness-rate properly appreciated? What official instructions have been issued in relation to the subject?
- (f.) Enumerate the chief causes [preventable and inevitable distinguished] that are producing and have caused broken health and invaliding?

VIII. RESISTANCE TO DISEASE [INCLUDING ENDURANCE OF WOUNDS AND SURGICAL OPERATIONS].

- (a.) Record facts ascertained respecting resistance and endurance at different periods of military service.
- (b.) When *protected* from malarious disease, in malarious regions; and when *not* protected.
- (c.) When the forces are most active [mobilized]; and when at rest in camp or garrison. Also when supplied and when not supplied with whiskey rations, [or indulging or not indulging therein].
- (d.) Resistance and endurance of men well fed, compared with results after fastings and deficient rations.
- (e.) Record facts that illustrate the influence of extreme transitions from north to south or south to north, as affecting the power of resistance and endurance.

IX. SANITARY HISTORY OF HOSPITAL AND OTHER TRANSPORTATION, AND THE SERVICES OF THE SANITARY COMMISSION CONNECTED THEREWITH.

- (a.) Report the evidence obtained relating to this subject and corroborate by statistics and the best official names.
- (b) Record such facts as will be of future use to military and medical authorities in matters relating to the transportation of sick and wounded by water or by land.
- (c.) Record testimony to the usefulness of the Sanitary Commission's aid and influence in Hospital transportation.
- (d.) Record facts illustrating the importance of Sanitary or Medical advice in the ordinary Transportation of Troops.

X. SURGICAL AND PATHOLOGICAL RECORD OF WOUNDS AND SURGERY.

[Each observer will make his observations in accordance with any schedule or plan he prefers, but include the following subjects:]

- (a.) *In Hospitals*.—Record total number of Amputations, and give a proper classification of them into *primary*, *secondary*, *intermediary*; and all the amputations near or above the knee or the elbow to be classified with reference to precise location.
- (b.) *Knee-joint injuries* to be accurately described and history given so far as relates to effects of transportation, results of delay or neglect of amputation; the success or non-success of conservative treatment, or the practical value of any decided improvements in the surgical appliances or surgical treatment of knee-joint injuries.

- (c.) *Compound Fractures of the Thigh* to be recorded with reference to their location and character; the method of treatment, the results of transportation, the nature and comparative value of different appliances for provisional support in the transportation of such fractures, the description of improved methods of treatment, and the reporting of such statistical information and other records of the best experience as can be obtained.
- (d.) *Chest Wounds*: Report statistical and practical results of the experience on particular battle-fields and in particular hospitals, and the results of individual experience and study by medical officers. Record statistics and illustrative cases, to show results, particularly as regards,—1st. the experience of surgeons in avoidance of *needless transportation*; 2d. in the utility of repose and an *opiate* treatment to the extent of diminishing respiratory action and pain; 3d. the utility or inutility of the *sealing treatment*.
- (e.) *Abdominal Wounds*: Pursue the same method of inquiry.
- (f.) *Wounds of the Skull and Brain*: Record illustrative cases and testimony, showing the results of surgical treatment and special care of this class of wounds.
- (g.) *Surgical Appliances*: Record facts that illustrate marked improvements. Describe the *best* of them, and whenever such improvements are not already well placed before the public, the description and plans to be fully presented to the Sanitary Commission.
- (h.) Record facts that show what the Sanitary Commission has effected by providing, suggesting, or encouraging improvements in surgical appliances, and furniture or fixtures for the sick and wounded.

XI. PREVENTABLE CAUSES OF ILL SUCCESS IN SURGERY, AND OF DELAYED OR IMPERFECT RECOVERY FROM WOUNDS, OR FROM SURGICAL OPERATIONS.

- (a.) Present statistical statements that will illustrate the results of wounds and surgery, giving such particularity as will verify the logical conclusions of science and general observation upon essential questions relating to the causes of delayed or imperfect recoveries, and the bad result of wounds and of operative surgery.
- (b.) Classify and clearly define the causes of such unfavorable results: Also present definite testimony relating to this subject: Likewise report suggestions and proofs relating to the preventability of such results. *Particularly ascertain and report the facts showing the importance and the results of timely and abundant supplies of nourishing food to the wounded.*

XII. RESEARCHES INTO THE RESULTS OF EXPERIENCE CONCERNING THE HYGIENIC QUESTIONS RELATING TO CONSERVATIVE AND HYGIENIC PLANS OF SURGICAL TREATMENT, ETC.

- (a.) Report (statistically as well as by full illustrations of cases, wards, or hospitals) the results of neglect or of intelligent practice of proper hygienic care; also to show the influence of such neglect or practice upon the ultimate results and popularity of conservative surgery.
- (b.) Present illustrations [statistics as far as practicable] of the successful results of conservative treatment of particular classes of wounds, etc., the records and testimony that show comparative and absolute results of conservative and of operative treatment of compound fractures of the long bones.

XIII. THE "ACCIDENTS OF SURGERY," AS ILLUSTRATING THE IMPORTANCE OF HYGIENIC CARE.

- (a.) Record the results of your own observations, and the experience of competent medical officers respecting the Hygienic conditions under which Hospital Gangrene, Pyæmia, Secondary Hæmorrhages, excessive Sloughing, Tetanus and Endemics, of Erysipelas, Dysentery, etc., occur in Surgical Wards.
- (b.) Report accurately the testimony and statistics of the ablest surgeons regarding individual and local experience in the observation and management of this class of evils.
- (c.) Record evidence concerning the utility or inutility of particular practices and materials in the disinfection of contaminated wards or wounds; also the value of any important Sanitary Works or methods of Sanitary Protection. *Report particularly upon the sanative effects of perfect ventilation, open-air treatment, and cleanliness.*

XIV. SURGICAL IMPROVEMENTS, AND IMPROVED SURGICAL APPLIANCES.

- (a.) Operations in Surgery, as regards the probabilities of the saving of life, and as to the usefulness of the limbs; for example, the conclusions that can now be recorded regarding the operations at the ankle joint and those in other portions of the leg. Report statistics and experience respecting resections and the proper care of resected parts, particularly as regards field-hospital experience, delayed transportation, hygienic care, etc.
- (b.) Report with great care all the more important improvements in Surgical Appliances, each inquirer to report such as comes under his observation and such as are certified by the best experience.

XV. SURGICAL AND HYGIENIC EXPERIENCE IN THE CONFEDERATE HOSPITALS.

- (a.) Report their statistics; particularly those relating to amputations, resections, compound fractures. Also with reference to Hospital Endemics of Gangrene, Pyæmia, etc.; and with particular regard to the history of fevers, and fatal Diarrhœal maladies, Scurvy, etc.
- (b.) Note the history of their Field Hospital service, and of their improvements in Surgical appliances and Surgical operations. Also report what is ascertained respecting their Hospital Dietaries and sanitary administration.

XVI. THE HYGIENIC CONDITION OF GARRISONS AND THE VARIOUS ARMS OF THE MILITARY AND NAVAL SERVICE.

- (a.) Report the results of your observations and inquiry, and corroborate the same by statistical and official information.
- (b.) Report accurately upon rates of crowding in quarters, water supply, anti-scorbutic rations, latrines, cleanliness, etc.
- (c.) Obtain and report information regarding sickness-rates, death-rates, and the preventable diseases that prevail. Report the chief sanitary wants, their causes and their remedy.
- (d.) Record statistical and other trustworthy information respecting the sanitary condition, the prevalent diseases, recuperative powers, sickness and death rates, and the vital endurance of colored troops.



